

09/826,166

| MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876) | | | | | | SERIAL NO. 09826166 | FILING DATE |
|--|------|------------------------|------|------------------------|------|------------------------|-------------|
| | | | | | | APPLICANT(S) | |
| | | | | | | CLAIMS | |
| AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | | | |
| IND. | DEP. | IND. | DEP. | IND. | DEP. | IND. | DEP. |
| 1 | 1 | 1 | | | | 51 | |
| 2 | 1 | 1 | | | | 52 | |
| 3 | 1 | 2 | | | | 53 | |
| 4 | 2 | Cancels | | | | 54 | |
| 5 | 2 | Cancels | | | | 55 | |
| 6 | 2 | 2 | | | | 56 | |
| 7 | 2 | 2 | | | | 57 | |
| 8 | 2 | 2 | | | | 58 | |
| 9 | 1 | Cancels | | | | 59 | |
| 10 | 2 | 2 | | | | 60 | |
| 11 | 2 | 2 | | | | 61 | |
| 12 | 1 | 1 | | | | 62 | |
| 13 | 1 | 1 | | | | 63 | |
| 14 | | | | | | 64 | |
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| 49 | | | | | | 99 | |
| 50 | | | | | | 100 | |
| TOTAL IND. | 4 | | 4 | | | TOTAL IND. | |
| TOTAL DEP. | 13 | → | 12 | → | → | TOTAL DEP. | |
| TOTAL CLAIMS | 22 | | 10 | | | TOTAL CLAIMS | |

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE
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